PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number VRT0120US

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS	 -	2/		(Coil	(Oddinit 2)				OR 7			
			Llo					RATE	FEE	┨.	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			26 minus 20= *			6		X\$ 9=		OR	X\$18=	108	
	DEPENDENT C		5 minus 3 = 2			·	->-	X43=		OR	X86=	172	
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	105D	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	<u>. </u>		=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
TOTAL											TOTAL		
ADDIT. FEEON ADDIT. (Column 1) (Column 2) (Column 3)													
_		CLAIMS		HIGHE	ST		ı	ì	ADDI-	ìr	1	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		= .		X43=			X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+145=										OR	+290=	•	
								TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
		٠				·	•						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		= .		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=		ا د	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	the "Highest Nur	nber Previously Pa	id For IN THIS	SPACE is I	ess than	20, enter "20."	AD	TOTAL DIT FEE	•	OR A	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													